

4-7



Application Data Sheet

Application Information

Application number:: 10/057,475
Filing Date:: 01/22/02
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R???:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: COMPOSITIONS AND METHODS FOR THE
DETECTION, DIAGNOSIS AND THERAPY OF
HEMATOLOGICAL MALIGNANCIES
Attorney Docket Number:: 014058-014402US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 52
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: Austria
Status: Full Capacity
Given Name: Alexander
Middle Name:
Family Name: Gaiger
Name Suffix: M.D.
City of Residence: Seattle
State or Province of Residence: WA
Country of Residence: USUS
Street of Mailing Address: 1421 -42nd Avenue, E.
City of Mailing Address: Seattle
State or Province of mailing address: WA
Country of mailing address: US
Postal or Zip Code of mailing address: 98112

Applicant Authority Type: Inventor
Primary Citizenship Country: United Kingdom
Status: Full Capacity
Given Name: Paul
Middle Name: A.
Family Name: Algate
Name Suffix: Ph.D.
City of Residence: Issaquah
State or Province of Residence: WA
Country of Residence: US
Street of Mailing Address: 580 Kalmia Place, N.W.
City of Mailing Address: Issaquah

State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98027

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jane
Middle Name::
Family Name:: Mannion
Name Suffix:: Ph.D.
City of Residence:: Edmonds
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 8904 -192nd Street, S.W.
City of Mailing Address:: Edmonds
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98026

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jonathan
Middle Name:: David
Family Name:: Clapper
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 2149 Dexter Avenue, North, #4

City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98109

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Peoples Republic of China
Status:: Full Capacity
Given Name:: Aijun
Middle Name::
Family Name:: Wang
Name Suffix::

City of Residence:: Issaquah
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 3106 -213th Place, S.E.
City of Mailing Address:: Issaquah
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98029

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nadia
Middle Name::
Family Name:: Ordonez
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US

Street of Mailing Address:: 2011 No. 154 Court
City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98133

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Lauren
Middle Name::
Family Name:: Carter
Name Suffix::

City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 7143 Beach Drive, S.W.
City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98136

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Patricia
Middle Name:: Dianne
Family Name:: McNeill
Name Suffix::
City of Residence:: Federal Way
State or Province of Residence:: WA

Country of Residence:: US
 Street of Mailing Address:: 1333 South -290th Place
 City of Mailing Address:: Federal Way
 State or Province of mailing address:: WA
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 98003

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

| | | |
|------------------------------|-------------------------|-----------------------|
| Representative Designation:: | Representative Number:: | Representative Name:: |
| Primary | 34,774 | Kevin Bastian |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------------|----------------------|----------------------|
| This Application | Continuation-in-part of | 10/040,862 | 11/06/01 |
| 10/040,862 | Continuation-in-part of | 09/796,692 | 03/01/01 |
| 09/796,692 | Non-Provisional of | 60/223,378 | 08/07/00 |
| 09/796,692 | Non-Provisional of | 60/223,416 | 08/04/00 |
| 09/796,692 | Non-Provisional of | 60/222,903 | 08/03/00 |
| 09/796,692 | Non-Provisional of | 60/218,950 | 07/14/00 |
| 09/796,692 | Non-Provisional of | 60/206,201 | 05/22/00 |
| 09/796,692 | Non-Provisional of | 60/202,084 | 05/04/00 |
| 09/796,692 | Non-Provisional of | 60/200,999 | 05/01/00 |
| 09/796,692 | Non-Provisional of | 60/200,303 | 04/28/00 |
| 09/796,692 | Non-Provisional of | 60/200,779 | 04/28/00 |
| 09/796,692 | Non-Provisional of | 60/200,545 | 04/27/00 |
| 09/796,692 | Non-Provisional of | 60/190,479 | 03/17/00 |
| 09/796,692 | Non-Provisional of | 60/186,126 | 03/01/00 |

Foreign Priority Information

| | | |
|-----------|----------------------|---------------|
| Country:: | Application number:: | Filing Date:: |
| PCT | 01/07272 | 03/01/01 |

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::